

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 244176US2 DIV	
		First Inventor or Application Identifier Gen SASAKI	
		Title IMAGE PROCESSING CIRCUIT OF IMAGE INPUT DEVICE	

102903

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		ACCOMPANYING APPLICATION PARTS	
2. <input checked="" type="checkbox"/> Specification Total Sheets 90		7. <input checked="" type="checkbox"/> Assignment Papers (Reel/Frame: 013344/0555)	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 27		8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 (2 pages)	
4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 3		9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee)</small> Attorney	
a. <input type="checkbox"/> Newly executed (original or copy)		10. <input type="checkbox"/> English Translation Document (if applicable)	
b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 17 completed)</small>		11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small>		12. <input checked="" type="checkbox"/> Preliminary Amendment	
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard	
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
a. <input type="checkbox"/> Computer Readable Form (CRF)		15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small>	
b. Specification or Sequence Listing on :		16. <input checked="" type="checkbox"/> Other: Request for Priority	
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or			
ii. <input type="checkbox"/> Paper			
c. <input type="checkbox"/> Statements verifying identity of above copies			

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation Divisional Continuation-in-part (CIP) of prior application no.: 09/459,574

Prior application information: Examiner: TRAN, N. T.

Group Art Unit: 2615

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

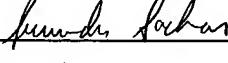
18. CORRESPONDENCE ADDRESS

Customer Number

22850

(703) 413-3000

FACSIMILE: (703) 413-2220

Name:	Gregory J. Maier	Registration No.:	25,599
Signature:			Date: Oct. 29 2003
Name:	Surinder Sachar	Registration No.:	34,423

Docket No. 244176US2 DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Gen SASAKI

SERIAL NO: New Application

FILING DATE: Herewith

FOR: IMAGE PROCESSING CIRCUIT OF IMAGE INPUT DEVICE

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

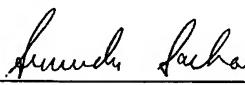
FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	2 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	2 - 3 =	0	x \$86 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
			BASIC FEE	\$770.00
			TOTAL OF ABOVE CALCULATIONS	\$770.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
			TOTAL	\$770.00

- Please charge Deposit Account No. 15-0030 in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.
- A check in the amount of **\$0.00** to cover the filing fee is enclosed.
- Credit card payment form is attached to cover the filing fee in the amount of **\$770.00**
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: Oct. 29 2003



Gregory J. Maier
Registration No. 25,599

Customer Number

22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 05/03)
I:\ATTY\ZS\24\SI244176US2 DIV\244176FEE.DOC

Surinder Sachar
Registration No. 34,423